

**TRANSMITTAL FORM**  
(to be used for correspondence after initial filing)

**Stamp:** OIPE JUN 09 2003

Application Number 09/113747  
 Filing Date 07/10/1998  
 First Named Inventor Andrea Basso et al.  
 Group Art Unit 2611  
 Examiner Name K. Bui  
 Attorney Docket Number 112592A

**RECEIVED**

JUN 11 2003

**Enclosures (check all that apply)**

- ☒ Fee Transmittal Form  
☐ Fee Attached  
☐ Amendment / Response  
☐ After Final  
☐ Affidavits / Declaration(s)  
☒ Extension of Time Request  
☐ Express Abandonment Request  
☐ Information Disclosure Statement  
☐ Certified Copy of Priority Document(s)  
☐ Response to Missing Parts under 37 CFR 1.52 or 1.53  
☐ Response to Missing Parts/Incomplete Application

- ☐ Assignment & Recordation Cover Sheet  
☐ Drawing(s) & Letter to Official Draftsman  
☐ Licensing-related Papers  
☐ Petition to the Commissioner  
☐ Petition to Convert a Provisional Application  
☒ Power of Attorney, Revocation Change of Correspondence Address  
☐ Terminal Disclaimer  
☐ Request for Refund

- ☐ After Allowance Communication to Group  
☐ Appeal Communications to Board of Appeals and Interferences  
☐ Appeal Communications to Group (Appeal Notice, Brief, Reply Brief)  
☐ Proprietary Information  
☐ Status Letter  
☒ Return Receipt Postcard  
☐ CD, Number of CDs  
☐ Additional enclosure(s) (please identify below)

Remarks

**CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Label

Customer Number - 26652

or ☐ Correspondence address below

<b>NAME</b>	Samuel H. Dworetzky		
<b>ADDRESS</b>	AT&T CORP. P.O. Box 4110		
<b>CITY</b>	Middletown	<b>STATE</b>	New Jersey
<b>COUNTRY</b>	United States of America	<b>ZIP CODE</b>	07748-4110
		<b>FAX</b>	732-368-6932

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

<b>NAME</b>	Michele L. Conover	<b>Reg. #</b>	34962
<b>TELEPHONE</b>	908-532-1879		
<b>SIGNATURE</b>	<i>Michele L. Conover</i>	<b>DATE</b>	6/5/03

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 6/5/03

Type or Printed Name *Rosemary Graziano*  
 Signature *Rosemary Graziano*

Date 6/5/03

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

## FEE TRANSMITTAL

Patent Fees are subject to annual revision.

TOTAL AMOUNT  
OF PAYMENT

\$110

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Technology Center 2600

## METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745  
 Deposit Account Name AT&T CORP.

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

## FEE CALCULATION

## 1. FILING FEE

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
1001	750	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	
1002	330	Design Filing Fee	
1004	750	Reissue Filing Fee	
1005	160	Provisional Filing Fee	

SUBTOTAL (1) 0

## 2. CLAIMS

☐ Filing Under 37CFR 1.53 (b)  
☐ CPA Under 37CFR 1.53 (d)  
☐ Amendment

Extra Claims		Fee from below	Fee Paid
Total	- 20 =	0 x 18 =	0
Ind.	- 3 =	0 x 84 =	0
Multiple Dependent Claims			0

Large Fee Code	Entity Fee(\$)	Fee Description
1202	18	Claims in excess of 20
1201	84	Independent Claims in excess of 3
1203	280	Multiple Dependent Claims
1204	84	** Reissue independent claims over original patent
1205	18	** Reissue claims in excess of 20 and over original patent

\*\* or number previously paid, if greater; for Reissues, see above

SUBTOTAL (2) 0

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
1051	130	Surcharge - late filing fee or oath	
1052	50	Surcharge - late provisional filing fee or cover sheet	
1053	130	Non-English specification	
1812	2520	For filing a request for reexamination	
1804*	920	Requesting publication of SIR prior to Examiner action	
1805*	1840	Requesting publication of SIR after Examiner action	
1251	110	Extension for response within first month	110
1252	410	Extension for response within second month	
1253	930	Extension for response within third month	
1254	1450	Extension for response within fourth month	
1255	1970	Extension for response within fifth month	
1401	320	Notice of Appeal	
1402	320	Filing a brief in support of an appeal	
1403	280	Request for oral hearing	
1504	300	Publication fee for early, voluntary, or normal publication	
1452	110	Petition to revive - unavoidable	
1453	1300	Petition to revive - unintentional	
1501	1300	Utility issue fee (or reissue)	
1502	470	Design issue fee	
1460	130	Petitions to the Commissioner	
1807	50	Processing fee for provisional applications	
1806	180	Submission of Information Disclosure Statement	
8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	Request for Continued Examination (RCE)	
1802	900	Request for expedited exam of a design application	

Other fee (specify):

SUBTOTAL(3) 110

## SUBMITTED BY

Typed or Printed Name Michele L. Conover

## Complete (if applicable)

Reg. Number 34962

Signature

Michele L. Conover

Date

6/5/03

Deposit Account User ID